2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112419

City-St-Zip:

JACKSONVILLE, FL 32256

FILED Apr 15, 2005 Secretary of State

Entity Name: BREAKTHROUGH, INC. **Current Principal Place of Business: New Principal Place of Business:** 11227 CASTLEMAIN CIRCLE NORTH JACKSONVILLE, FL 32256 **Current Mailing Address: New Mailing Address:** 11227 CASTLEMAIN CIRCLE NORTH JACKSONVILLE, FL 32256 FEI Number: 01-0569861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HETSLER, ROBERT G. JR 11227 CASTLEMAIN CIRCLE NORTH JACKSONVILLE, FL 32256 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete Title: PCFO (X) Change () Addition BROUSSARD, CLINT F Name: Name: BROUSSARD, CLINT F 1000 GATE PARKWAY NORTH #112 5839 PARKSTONE CROSSING Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32258 Title: Title: () Change () Addition () Delete HETSLER, ORIANA P Name: Name: 11227 CASTLEMAIN CIRCLE NORTH Address: Address: JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip: Title: Title: **VCFO** () Delete () Change () Addition HETSLER, ROBERT G JR. Name: Name: 11227 CASTLEMAIN CIRCLE NORTH Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBERT G. HETSLER **VCFO** 04/15/2005